

Patricia Booker

MULTIPLE DEPENDENT CLAIM FEE CALCULATION SHEET (FOR USE WITH FORM PTO-875)						SERIAL NO.	FILING DATE						
						10/573135							
						APPLICANT(S)							
						CLAIMS							
	AS FILED		AFTER 1 <sup>ST</sup> AMENDMENT		AFTER 2 <sup>ND</sup> AMENDMENT			AS FILED		AFTER 1 <sup>ST</sup> AMENDMENT		AFTER 2 <sup>ND</sup> AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.		IND.	DEP.	IND.	DEP.	IND.	DEP.
1							51						
2							52						
3							53						
4	3						54						
5	3						55						
6	3						56						
7	3						57						
8	3						58						
9	3						59						
10	3						60						
11	3						61						
12	3						62						
13	1						63						
14	1						64	1					
15	1						65	1					
16	1						66	1					
17	1						67	1					
18							68	4	2				
19							69	1					
20							70	1	2	1			
21							71	2		1			
22	6			5			72	2		1			
23	6			5			73	10		3			
24	6			5			74	1		1			
25	6			5			75	1					
26	6			5			76	2					
27	6			5			77	2					
28	6			5			78	1					
29	6			5			79	2		1			
30	6			5			80	2		1			
31	6			5			81						
32	6			5			82						
33	6			5			83						
34	6			5			84						
35	6			5			85						
36	6			5			86						
37	6			5			87						
38	6			5			88						
39	6			5			89						
40	6			5			90						
41	6			5			91						
42	6			5			92						
43	6			5			93						
44	6			5			94						
45	6			5			95						
46	6			5			96						
47	6			5			97						
48	6			5			98						
49	6			5			99						
50	6			5			100						
TOTAL IND.	15			9			TOTAL IND.						
TOTAL DEP.	97	←	97	←	106	↓	TOTAL DEP.	←	←	↓	←	←	
TOTAL	112						TOTAL						